

Kelly (H. A.)

Delivery by Traction on the
Scalp of the Child

BY

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REPRINTED FROM

THE AMERICAN JOURNAL OF OBSTETRICS

Vol. XXXIV. No. 3, 1896.

NEW YORK

WILLIAM WOOD & COMPANY, PUBLISHERS
1896

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DELIVERY BY TRACTION ON THE SCALP OF THE CHILD.

BY

HOWARD A. KELLY, M.D.

I WELL remember one of my earlier obstetric cases among the mill population of Kensington, Philadelphia, in which the head was delayed in the lower part of the pelvis, and, after considerable moulding, a long ridge of skin, projecting about two centimetres from the skull, formed on the child's scalp; this offered such a good hold that I grasped it between the thumb and forefinger of both hands and tried to assist delivery by the strong traction I was then able to make. The effort was futile and the forceps was needed to complete the delivery.

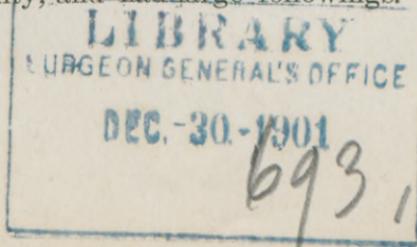
Curiously enough, however, I find that the scalp of the child has been used as a tractor in quite another way in at least two parts of the country somewhat remote from each other.

During a recent visit to Rockingham County, Va., Dr. G. W. Richards described a delivery which he had effected in the following manner eight years ago:

The patient was a primipara, about 30 years old, who had a slow labor and weak pains. The head was well engaged but did not advance, and, as the doctor did not have his obstetric instruments with him and saw no other means of securing good traction, he deliberately cut a bridle of tissue, an inch wide and two inches long, through the scalp on the most accessible part of the child's head near the posterior fontanelle, and, hooking his finger through this, pulled until it broke. A piece of tissue larger than a dollar was pulled off. Delivery was effected, however, but the wound suppurated, and the child is living with a small scar in the scalp as big as the end of a finger.

It is strange that a somewhat similar plan should have been in vogue many years ago in the practice of a certain physician of Wilkes-Barre, Pa., as related to me by Dr. G. W. Guthrie, on the authority of the late Dr. Edward R. Mayer.

Dr. Mayer writes: "Then there were other pure and capable men who did the best they could with their lights, enjoyed the confidence of the community, and had large followings. One



of the most esteemed and successful of these, once, with modest triumph, let me into a secret of his success in obstetric procedure. He attributed this to a method of his own discovery, which he considered worthy of publication, but had not yet mustered courage to place in print. This was that of incising the fetal scalp with scissors, inserting the index between it and the calvarium, and thus forcibly extracting. It is needless to say that this really good man had never owned or seen a forceps. I do not remember having seen his method referred to in print, but I have lately seen the cicatrices left by him upon the now bald heads of some of his victims."¹

I may add that I report these cases as curiosities of obstetrical procedure only.

¹ See "The Now and Then of Medicine: A Post-Prandial Discourse, delivered at the celebration of the twenty-fifth anniversary of the Luzerne County Medical Society, Wilkes-Barre, Pa., January 13th, 1886, by Edward R. Mayer, M.D."

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